530 E MONROE AVE BUCKEYE AZ 85326 (623) 349-6100

OFFICE USE ONLY: ACCOUNT #:



MONDAY – THURSDAY
7:00 AM – 6:00 PM
UTILITYBILLING@BUCKEYEAZ.GOV

TERMINATION FORM	
Your requested Disconnect Date cannot be prior to Today's Date. Must be a minimum of 2 working days after the date received in our office	
TODAYS DATE:	DISCONNECT DATE(MON-THU):
PROPERTY INFORMATION:	
PROPERTY ADDRESS:	
CUSTOMER INFORMATION:	
CUSTOMER # 1 (LAST NAME, FIRST)	CUSTOMER # 2 (LAST NAME, FIRST)
NAME:	NAME:
DOB:	DOB:
SSN/TAX ID:	SSN/TAX ID:
DL/ID:	DL/ID:
PHONE #:	PHONE #:
REQUIRED INFORMATION:	
FORWARDING MAILING ADDRESS:	
I/we declare under penalty of perjury under the laws of the State of Arizona that all information is true and correct. I have the lawful authority to disconnect utility services for the address identified on the submittal; I am accepting all financial responsibility for the utilities account, and I agree that I will remain financially responsible for the utility account until it has been paid in full. SIGNATURE OF CUSTOMER #1 SIGNATURE OF CUSTOMER #2	